

Minneapolis VA Health Care System (MVAHCS) PGY-1 Pharmacy Practice Residency 2023-24: Inpatient & Ambulatory Care

This post-graduate year one (PGY-1) pharmacy residency program at the MVAHCS (also known as the “Minneapolis VA”) is one of the first accredited residency programs with 60 years of continuous accreditation through ASHP. This program has been designed to develop practitioners with the high level of skill required to manage patient care as integral members of interdisciplinary teams. Graduates of this program have been successful in an assortment of clinical positions.



VA



**U.S. Department
of Veterans Affairs**

ASHP-Accredited

PGY1 – Pharmacy Residency
PGY2 – Pain Management and Palliative Care
PGY2 – Psychiatric Pharmacy
PGY2 – Geriatric Pharmacy

The MVAHCS is one of the ten largest VA medical centers in the country, serving more than 100,000 veterans in a six-state area of the upper Midwest. The MVAHCS provides a full range of patient care services with state-of-the-art technology, educational resources, and research. More than 100 pharmacists play a vital role in the delivery of patient care; working as a team with physicians, nurses and other health care practitioners to ensure America’s veterans receive the finest care. Pharmacists routinely interact one-on-one with patients providing consultation and guidance on the use of medications through an independent scope of practice. VA pharmacists fully utilize their skills and knowledge in their daily practice.

The VA clinics provide primary care as well as a wide variety of medical subspecialty care for Veterans throughout Minnesota and Wisconsin. During the ambulatory care blocks, residents co-manage patients as part of an interdisciplinary team in a practice that has evolved over the years, allowing pharmacists to practice at the top of their license. In addition to completing patient appointments, residents write progress notes for patients they assess and (in collaboration with preceptors) have authority to write prescriptions, order laboratory and other diagnostic tests, consult other services when indicated, and develop therapeutic and monitoring plans for patient follow-up. Care is provided via face-to-face, telephone, and video appointments. Within primary care, patients are seen for a variety of medical problems. As part of this service, residents provide interim care for patients between visits to primary care providers. Care in specialty clinics includes metabolic and endocrinology, rheumatology, cardiology, hepatology, gastroenterology, pulmonology, nephrology, infectious disease and HIV, neurology, spinal cord injury, hematology and oncology, pain management, anticoagulation clinics, and more. Residents also have the opportunity to develop formulary management skills.

The main hospital has 348 beds and provides acute care services to psychiatry, spinal cord, neurology, surgery, cardiology, intensive care, and general internal medicine. There are also 104 beds in the Community Living Center (CLC). Residents spend their first block completing an inpatient rotation that serves as an orientation to acute care. This will assist the resident in becoming acclimated to inpatient pharmacy services and serve as a foundation for future acute care rotations and weekend staffing responsibilities. Additional inpatient rotations may include general medicine, ICU, cardiology, and rehab/transitional care wards.

Project/Research/Teaching Requirements

The MVAHCS pharmacy residency programs use the inverted research model (IRM). During the first half of the year, residents are involved in data collection, data analysis, presentation, and manuscript submission as they finish this project. During the second half of the year, residents start a project to be finished the next residency year, performing the background research, developing the protocol, and obtaining IRB approval (if applicable). This allows residents to gain project management experience in two longitudinal projects during one residency year. Residents work with preceptors, subject matter experts and the research team on these projects. The resident is expected to present a poster at the ASHP midyear clinical conference in December and orally present at the North Star Pharmacy Residency Conference in May. A final manuscript is a requirement for completion of the residency. A medication use evaluation (MUE) is also required during the year. Lastly, for the teaching requirement all PGY-1s are required to participate in the national VA teaching certificate program which entails participating in preceptor development activities/seminars, two presentations and developing a teaching portfolio. MVAHCS is affiliated with the University of Minnesota (UMN) College of Pharmacy and School of Medicine and residents serve as preceptors to their IPPE and APPE students throughout the year. Didactic teaching experiences through the University may be available in PGY-2 programs based on interest. Other opportunities to provide education to pharmacy, nursing, medicine, and/or other disciplines during the year may include but are not limited to providing a drug information service, writing pharmacy newsletters, in-service education, grand rounds, morbidity and mortality lectures, journal club, and more.

Program Structure in 2023-24

Area	Duration
Orientation	4 weeks (2 block rotations)
Acute Care ¹	11 weeks (2 block rotations)
Ambulatory Care ²	11 weeks (2 block rotations)
Leadership, Quality, & Management	3 weeks (3 block rotations)
Electives ³	18 weeks (3-4 block rotations)
Interprofessional Experience (IPE) ⁴	4 weeks (1 block rotation)
Interprofessional Experience (IPE) ⁴	Longitudinal (1 day per week for 11 months)
Project/Research/Teaching	Longitudinal (administrative)
Staffing	Longitudinal (1 Evening and 1 Weekend per month)

1. Acute Care: residents will have 2 required acute care block rotations. Choices include Cardiology, General Internal Medicine, or Surgery Medicine.
2. Ambulatory Care: residents will have 2 required ambulatory care block rotation with at least one block being in Primary Care, Community Based Outpatient Care or Women's Health. The second block can also be in Specialty Care (Rheumatology, Metabolic/Endocrinology, Pulmonology, Nephrology, Cardiology, Infectious Disease and HIV, Hepatology, Gastroenterology, and more), Spinal Cord Injury, Home Based Primary Care or Anticoagulation as well as the first 3 clinic options.
3. Electives: residents will have 3-4 block rotations based on interest. To maintain a balanced first-year residency one elective block rotation should be in ambulatory care and one elective block rotation in inpatient care. Ambulatory care electives include Primary Care, Specialty Care (Rheumatology, Metabolic/Endocrinology, Pulmonology, Nephrology, Cardiology, Infectious Disease and HIV, Hepatology, Gastroenterology, and more), Spinal Cord Injury, Home Based Primary Care, and Anticoagulation. Inpatient care electives include Critical Care, General Internal Medicine, Cardiology, Surgery Medicine, and Extended Care & Rehab that includes the Community Living Center, TBI/Polytrauma and Hospice/Palliative Care wards. Other electives are noted below.
4. IPE: residents will have a block and longitudinal IPE experience based on interest. Areas include Infectious Disease, Geriatric Research, Education and Clinical Center (GRECC), Academic Patient Aligned Care, Women's Health, or Serious Mental Illness (SMI is aligned with the MH resident only).

Elective Learning Experiences

Area	Area
Academic Detailing	Hospice and Palliative Care
Addiction Recovery Services	Home Based Primary Care
Advanced Critical Care	Informatics
Advanced Specialty Ambulatory Care	Inpatient Psychiatry
Advanced Primary Ambulatory Care	Pain Management
Advanced General Internal Medicine	Prior Authorization/Formulary Management
Advanced Cardiology	Research
Anticoagulation	Serious Mental Illness
Antimicrobial Stewardship	Spinal Cord Injury
Dementia Unit within the Community Living Center	Traumatic Brain Injury/Polytrauma/Rehab
Hematology/Oncology	Women's Health

*Other elective learning experiences may be developed based on the residents interests and preceptor availability

Twin Cities, MN



The Minneapolis-St. Paul metropolitan area has a combined population of over 2.4 million people. The Twin Cities are nationally recognized for their arts, most notable are the Guthrie Theater, Minnesota Orchestra, Minneapolis Institute of Art, Science Museum and the

Walker Art Center. Not to mention the many art festivals throughout the year. The VA Medical Center is located very near to both the Mall of America and the airport. Recreational activities span the four seasons, and the state is home to seven professional sports teams: Twins, Vikings, Timberwolves, Lynx, Wild, Minnesota United FC, and St. Paul Saints. The Twin Cities are also known for music and food.



PGY-1 Pharmacy Practice Residency Application Procedure

(ASHP Code: 63101; NMS Code General PGY1: 190813; NMS Code General PGY1 with MH Longitudinal Experience: 190821)

Applicants must be a graduate of an American Council of Pharmaceutical Education (ACPE) accredited School of Pharmacy with a Doctor of Pharmacy Degree (Pharm.D.). All residents will be required to successfully complete a state board examination. Licensure may be obtained through any U.S. State Board of Pharmacy. It is preferred that the Board Examination is completed prior to starting the residency, however there is flexibility. You must be licensed within 90 days of your start date. U.S. citizenship is required. The applicant must be registered with the American Society of Health System Pharmacists' Match Program. An interview is required for all applicants.

Application Requirements:

- Complete online application through PhORCAS
- All application materials must be submitted via PhORCAS by January 2nd of 2024
- Academic transcripts including pharmacy school transcripts with a description of the grading scale if not on a 4-point system
- Curriculum Vitae
- Letter of Intent
- Reference Letters (3) utilizing PhORCAS standardized form (hint: don't submit over 3 as only the first 3 will be read)
- Supplemental Essay (see website for details)

Some of the criteria considered in choosing residents include knowledge of professional practice, communication skills and ability to apply theory to practice, leadership ability, interest in the program, confidence, and professionalism.

See our website for additional information: <https://www.va.gov/minneapolis-health-care/work-with-us/internships-and-fellowships/pharmacy-student-and-residency-programs/>

PGY-1 Pharmacy Practice Residency General Information and Benefits

General Information:

- Duration: 12 months
- Number of Positions: 3 general and 1 general with a mental health longitudinal experience
- Starting Date: July 1st, 2024
- Model Type: Teaching, Tertiary
- Estimated Stipend: \$51,186

Benefits:

- Competitive stipend
 - 4 hours annual leave and 4 hours sick leave per pay period (2 weeks)
 - 11 paid holidays per year
 - Eligible for federal employee health
 - Dedicated resident office space
 - Free parking
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Pharmacy Residents



PGY-1 and PGY-2 residents - Top row: Kyla Dickey, Jason Post, Leyla Rashid, Kally Kvidera, and Claudia Epland; Bottom row: Jacob Mozer, Alyssa Isola, Elizabeth Francis, Tasmiah Rahman, and Hannah VanTruong



PGY-1 residents from left to right: Jacob Mozer, Claudia Epland, Kally Kvidera, Jason Post, Hannah VanTruong and Tasmiah Rahman

PGY-1 Residents	PGY-2 Residents
Claudia Epland Email: Claudia.Epland@va.gov	Kyla Dickey Email: Kyla.Dickey@va.gov
Kally Kvidera Email: Kally.Kvidera@va.gov	Elizabeth Francis Email: Elizabeth.Francis3@va.gov
Jacob Mozer Email: Jacob.Mozer@va.gov	Alyssa Isola Email: Alyssa.Isola@va.gov
Jason Post Email: Jason.Post@va.gov	Leyla Rashid Email: Leyla.Rashid@va.gov
Tasmiah Rahman Email: Tasmiah.Rahman@va.gov	
Hannah VanTruong Email: Hannah.VanTruong@va.gov	

Program Director



Shannon Tulk, PharmD,
BCPS
Clinical Pharmacy
Practitioner
Pronouns: She/Her/Hers
Minneapolis VA Health
Care System
1 Veterans Drive
Minneapolis, MN 55417
Phone: 612-467-2040
Email: Shannon.Tulk@va.gov
(preferred)

Our Commitment to Diversity, Equity, and Inclusion

At the Minneapolis Veterans Affairs Health Care System, we are committed to fostering and sustaining an environment which celebrates diversity, provides equitable opportunities for employment and promotion, and supports inclusiveness in pharmacy culture. We embrace our differences as individuals and unite as a pharmacy team toward a common goal: to deliver optimal, patient-centered care for our nation's veterans.



Congratulations 2022-23 Resident Graduates:

From left to right bottom row:
Christy Varghese (PGY-2 pain management and palliative care), Becky Thelen (PGY-1 general), and Leyla Rashid (PGY-1 general with mental health longitudinal exp)

From left to right top row:
Sabrina Sturm (PGY-1 general),
Jesse Upton (PGY-2 psychiatry),
Hailee Griffin (PGY-2 geriatrics),
and Siri Roberts (PGY-1 general)

